STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	155784	A. BUILDING _____ B. WING _____	C 06/08/2011

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
MICHIANA HEALTH AND REHABILITATION CENTER	1420 E DOUGLAS ROAD MISHAWAKA, IN 46545

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETION DATE
F 000	INITIAL COMMENTS This visit was for the Investigation of Complaint IN00090918. This visit was in conjunction with the PSR (Post Survey Revisit) to the Investigation of Complaint IN00089055 completed on 4/27/11. Complaint IN00090918-Substantiated. Federal/State deficiencies related to the allegations are cited at F-221, F-241, and F-248. Survey Dates: June 7 and 8, 2011 Facility number: 012329 Provider number: 155784 Aim number: 201002500 Surveyor: Antoinette Krakowski, RN Census bed type: NF: 32 SNF/NF: 46 Total: 78 Census payor type: Medicare: 46 Medicaid: 14 Other: 18 Total: 78 Sample: 3 These deficiencies also reflect State findings in accordance with 410 IAC 16.2. Quality review completed 6/10/11	F 000		

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE | TITLE | (X6) DATE

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F 000	Continued From page 1	F 000		
	Cathy Emswiller RN			
F 221 SS=D	483.13(a) RIGHT TO BE FREE FROM PHYSICAL RESTRAINTS The resident has the right to be free from any physical restraints imposed for purposes of discipline or convenience, and not required to treat the resident's medical symptoms. This REQUIREMENT is not met as evidenced by: Based on observation, interview, and record review, the facility failed to ensure a resident was kept free from restraints related to the facility use of a floor mat to keep a dementia resident from rising and freely moving about the facility for 1 of 3 residents reviewed for restraints in a sample of 3. Resident: #C Findings include: During initial tour of the facility on 6/07/11 at 9:05 A.M., while accompanied by the ADON (Assistant Director of Nursing), she indicated Resident #C had dementia and was equipped with personal alarms on her wheel chair and bed because of a history of falls. Resident #C was seated in the Day Room of her unit at the time of the initial tour. Resident #C's clinical record was reviewed on 6/07/11 at 2:50 P.M. and indicated diagnoses of, but not limited to: dementia, a history of urinary tract infection (UTI), and a history of falls. Review of Nurse's Progress Notes, dated 5/19/11,	F 221		

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F 221	Continued From page 2	F 221		

indicated: 4:40 P.M.-"Up in W/C (wheel chair). Chair alarm on. Got up from W/C and attempted to walk. Intervened just as pt (patient) about to fall. Very unsteady on feet-leads with head...5:15 P.M.-Again making several attempts to get up unassisted...6:15 P.M.-Came out of room from assisting resident to find (Resident #C) up and amb (ambulating) 8 feet from unlocked W/C. Staggering gait. Again, intervened before fall...7:10 P.M.-Again up-eased to floor on fall-mat. Watching game show. Fluids at hand...."

During interview with LPN #2 at 4:40 P.M. on 6/07/11, she indicated she placed Resident #C on the fall-mat in the day room because she was so busy and didn't know what to do with her so she wouldn't fall and sustain an injury. "There was a job fair in the facility that evening and I was advised by my supervisor to put Resident #C on the floor mat because she couldn't fall from that position." When queried if Resident #C could rise from the floor mat without assistance, LPN #2 stated, "She could not."

The quarterly MDS (Minimum Data Set) Assessment, dated 5/30/11, indicated Resident #C was not steady and could only rise from a seated to standing position and surface to surface transfer with human assistance. It further indicated she was moderately impaired for decision-making.

A Care Plan titled "Fall/Injury Assessment: Prevention and Management Plan of Care," initiated 2/22/11 and updated 5/30/11, indicated, "Assessment: ...Cognitive Impairment factors: Dementia-does not always remember to use call light/ask for assist to get up...decreased safety

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F 221	Continued From page 3	F 221		

awareness...Goal: Will be free of a serious injury if a fall would occur...Interventions: Diversional activity-lg (large) puzzle...bed and chair sensors (initiated 2/25/11)...."

An IDT (Inter-disciplinary Team) Progress Note, dated 3/30/11, indicated, "...recent fall 3/29/11 without injury. Immediate intervention was diversional activity; activities notified re (regarding) need for increased activity to alleviate boredom...."

During continued interview with LPN #2 on 6/07/11 at 4:40 P.M., she indicated that Resident #C puts the puzzle together in five minutes and is then bored with it. "She needs other things to occupy her. I take her for a walk when I have time, but other than that, she sits in the Day Room or at the Nurse's station where we can provide a one on one observation of her."

The Director of Nursing indicated in an interview on 6/08/11 at 4:00 P.M., the facility would check into a "busy box" of some sort to offer Resident #C some additional types of activities.

A facility policy titled "Safety Device-Least Restrictive," revised January 2011, indicated, "Policy: ...Restraining Safety Device: A restraining safety device (physical restraint) is defined as any manual method or physical or mechanical safety device, material, or equipment attached or adjacent to the resident's body that: ...restricts freedom of movement or normal access to ones body...."

This federal tag relates to Complaint IN00090918.

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F 221	Continued From page 4 3.1-3(w)	F 221		
F 241 SS=D	483.15(a) DIGNITY AND RESPECT OF INDIVIDUALITY The facility must promote care for residents in a manner and in an environment that maintains or enhances each resident's dignity and respect in full recognition of his or her individuality. This REQUIREMENT is not met as evidenced by: Based on observation, interview, and record review, the facility failed to ensure a resident's dignity was upheld related to the facility placing her on a floor mat in the Day Room of the unit to keep her from rising and freely moving about the facility for 1 of 3 residents reviewed for restraints in a sample of 3. Resident: #C Findings include: During initial tour of the facility on 6/07/11 at 9:05 A.M., while accompanied by the ADON (Assistant Director of Nursing), she indicated Resident #C had dementia and was equipped with personal alarms on her wheel chair and bed because of a history of falls. Resident #C was seated in the Day Room of her unit at the time of the initial tour. Resident #C's clinical record was reviewed on 6/07/11 at 2:50 P.M. and indicated diagnoses of, but not limited to: dementia, a history of urinary tract infection (UTI), and a history of falls. Review of Nurse's Progress Notes, dated 5/19/11,	F 241		

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F 241	Continued From page 5	F 241		

indicated: 4:40 P.M.-"Up in W/C (wheel chair). Chair alarm on. Got up from W/C and attempted to walk. Intervened just as pt (patient) about to fall. Very unsteady on feet-leads with head...5:15 P.M.-Again making several attempts to get up unassisted...6:15 P.M.-Came out of room from assisting resident to find (Resident #C) up and amb (ambulating) 8 feet from unlocked W/C. Staggering gait. Again, intervened before fall...7:10 P.M.-Again up-eased to floor on fall-mat. Watching game show. Fluids at hand...."

During interview with LPN #2 at 4:40 P.M. on 6/07/11, she indicated she placed Resident #C on the fall-mat in the day room because she was so busy and didn't know what to do with her so she wouldn't fall and sustain an injury. "There was a job fair in the facility that evening and I was advised by my supervisor to put Resident #C on the floor mat because she couldn't fall from that position." When queried if Resident #C could rise from the floor mat without assistance, LPN #2 stated, "She could not."

The quarterly MDS (Minimum Data Set) Assessment, dated 5/30/11, indicated Resident #C was not steady and could only rise from a seated to standing position and surface to surface transfer with human assistance. It further indicated she was moderately impaired for decision-making.

A Care Plan titled "Fall/Injury Assessment: Prevention and Management Plan of Care," initiated 2/22/11 and updated 5/30/11, indicated, "Assessment: ...Cognitive Impairment factors: Dementia-does not always remember to use call light/ask for assist to get up...decreased safety

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F 241	Continued From page 6 awareness...Goal: Will be free of a serious injury if a fall would occur...Interventions: Diversional activity-lg (large) puzzle...bed and chair sensors (initiated 2/25/11)...." An IDT (Inter-disciplinary Team) Progress Note, dated 3/30/11, indicated, "...recent fall 3/29/11 without injury. Immediate intervention was diversional activity; activities notified re (regarding) need for increased activity to alleviate boredom...." During continued interview with LPN #2 on 6/07/11 at 4:40 P.M., she indicated that Resident #C puts the puzzle together in five minutes and is then bored with it. "She needs other things to occupy her. I take her for a walk when I have time, but other than that, she sits in the Day Room or at the Nurse's station where we can provide a one on one observation of her." The Director of Nursing indicated in an interview on 6/08/11 at 4:00 P.M., the facility would check into a "busy box" of some sort to offer Resident #C some additional types of activities. This federal tag relates to Complaint IN00090918. 3.1-3(t)	F 241		
F 248 SS=D	483.15(f)(1) ACTIVITIES MEET INTERESTS/NEEDS OF EACH RES The facility must provide for an ongoing program of activities designed to meet, in accordance with the comprehensive assessment, the interests and the physical, mental, and psychosocial well-being of each resident.	F 248		

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F 248	Continued From page 7 This REQUIREMENT is not met as evidenced by: Based on observation, interview, and record review, the facility failed to ensure a resident with dementia and a history of falls was provided diversionary activities to meet the needs of the resident for 1 of 3 dementia residents reviewed for activities in a sample of 3. Resident: #C Findings include: During initial tour of the facility on 6/07/11 at 9:05 A.M., while accompanied by the ADON (Assistant Director of Nursing), she indicated Resident #C had dementia and was equipped with personal alarms on her wheel chair and bed because of a history of falls. Resident #C was seated in the Day Room of her unit at the time of the initial tour. Resident #C's clinical record was reviewed on 6/07/11 at 2:50 P.M. and indicated diagnoses of, but not limited to: dementia, a history of urinary tract infection (UTI), and a history of falls. Review of Nurse's Progress Notes indicated Resident #C had sustained a fall on 2/25/11, 2/28/11, 3/29/11, and 5/28/11 while outside her room. The quarterly MDS (Minimum Data Set) Assessment, dated 5/30/11, indicated Resident #C was moderately impaired for decision-making. It further indicated she needed extensive assist of staff for transfer and assist of one staff for ambulation.	F 248		

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F 248	Continued From page 8	F 248		

A Care Plan titled "Fall/Injury Assessment: Prevention and Management Plan of Care," initiated 2/22/11 and updated 5/30/11, indicated, "Assessment: ...Cognitive Impairment factors: Dementia-does not always remember to use call light/ask for assist to get up...decreased safety awareness...Interventions: Diversional activity-lg (large) puzzle (initiated 2/25/11)...."

An IDT (Inter-disciplinary Team) Progress Note, dated 3/30/11, indicated, "...recent fall 3/29/11 without injury. Immediate intervention was diversional activity; activities notified re (regarding) need for increased activity to alleviate boredom...."

During observation of Resident #C on 6/07/11, she was observed sitting at a table in the Day Room across from the Nurse's Station from the time of the initial tour (9:05 A.M.) until she was toileted and taken to lunch at noon. She was observed sitting alone at a table in the facility cafe at 1:45 P.M. A staff person was observed near a vending machine in the cafe. During interview with LPN #3 at 2:45 P.M., she indicated Resident #C had attended an ice cream social in the cafe with other residents. At 2:50 P.M., Resident #C was again observed in her wheel chair in the Day Room across from the Nurse's Station. An unopened puzzle box was observed on the table near where she was sitting. She was leaning forward in her wheel chair; there were no other residents in the Day Room. LPN #3 was summoned for fear Resident #C might fall from her wheel chair. LPN #3 wheeled Resident #C up to the Nurse's Station where she was observed sitting with nothing to do for the remainder of the

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F 248	Continued From page 9	F 248		

afternoon until 4:20 P.M. when staff wheeled her down the hall for a quick tour to the front lobby of the facility. Staff would occasionally address her while she was sitting at the Nurse's Station desk.

During interview with LPN #2 on 6/07/11 at 4:40 P.M., she indicated that Resident #C puts the puzzle together in five minutes and is then bored with it. "She needs other things to occupy her. I take her for a walk when I have time, but other than that, she sits in the day room or at the Nurse's station where we can provide a one on one observation of her." She indicated there are two activity staff, but only one was in (6/07/11) and she was very busy because there were many other residents she needed to provide activities for. "I wondered if she wouldn't enjoy a coloring book and crayons to help keep her busy."

The Director of Nursing indicated in an interview on 6/08/11 at 4:00 P.M., the facility would check into a "busy box" of some sort to offer Resident #C some additional types of activities.

A facility policy titled "Extendicare Life Enrichment Program," dated January 2009, indicated, "Policy: Extendicare Health Services, Inc. (EHSI) goal is to provide meaningful recreational and individualized activities to the residents who we serve in our Extendicare centers...Standards: ...5 or more activities available per day...individualized programs for those not able to attend multi-participant activities...."

This federal tag relates to Complaint IN00090918.

3.1-33(a)